

## PART B - FEE(S) TRANSMITTAL

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October 27, 2010

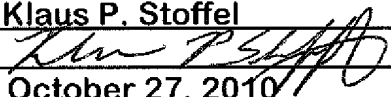
40579 7590

Lucas & Mercanti LLP  
 475 Park Avenue South  
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<b>Klaus P. Stoffel</b>	(Depositor's name)
	(Signature)
<b>October 27, 2010</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/523,600	09/26/2005	Adolf-Gustav Zajber	HM-614PCT	5833

TITLE OF INVENTION: METHOD AND DEVICE FOR DYNAMICALLY RESTING ROLLER SEGMENTS THAT SUPPORT AND/OR GUIDE BOTH SIDES OF A CAST BAR MADE OF METAL, PARTICULARLY STEEL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	11/05/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
KERNS, KEVIN P	1793	164-484000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a **Customer Number** is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **LUCAS & MERCANTI, LLP**

2 **Klaus P. Stoffel**

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**SMS SIEMAG AKTIENGESSELLSCHAFT**

**DUSSELDORF, GERMANY**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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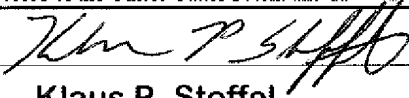
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **02-2275** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

  
**Klaus P. Stoffel**

Date

**October 27, 2010**

Typed or printed name

Registration No. **31668**

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